

**Advance Medical Directive/ “Living Will”:** An advance medical directive or “living will” is separate from your will, but may be an important part of your estate plan. It states that in the event you have a terminal, incurable medical condition and your life is only being prolonged by means of artificially provided life support, and if you cannot communicate your desires, the living will “speaks for you” so your doctors know and can act upon, your desires regarding the termination of life support. The conditions that trigger your living will, and the extent of the medical care to be withdrawn, vary under State law. Your legal assistance attorney can help you decide which State(s) forms to prepare. Once executed, the document is effective until you revoke it, which you may do at any time by physically destroying the document, or in an emergency, by verbally revoking it before witnesses who can testify that you did in fact revoke it.

Do you want a living will?       ☐ Yes       ☐ No

If you currently live in a state other than the one in which you are a legal resident, you may want your living will to be drafted in accordance with the laws of the state where you actually live and not your state of legal residence, because it is more likely to be used where you currently live.

**Special Power of Attorney for Health Care:** Another important health care document is a special power of attorney for health care. You may execute this in addition to, or instead of a living will. It appoints someone you name to make medical care decisions for you if you cannot make your own medical decisions. It applies to more situations than the living will, which addresses only continued life support if you have a terminal condition. The power of attorney for medical care gives the person you name as your agent the authority to make a wide range of medical decisions on your behalf. It also gives your agent access to your medical information and authority to fully participate with your treating physicians in deciding the care to be provided to you. Obviously, the person you designate to be your agent should be someone you trust with life and death decisions. Like the living will, the power of attorney is usually drafted in accordance with the laws of the state where you reside.

Do you want a Health Care Power of Attorney?       ☐ Yes       ☐ No  
Do you want your spouse to act as your agent?       ☐ Yes       ☐ No

Unless you have selected your spouse to act as your agent **and** your spouse has the same address you do, please provide the name, address, phone number, and relationship of your first choice of agent: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

If you have a second choice, do you want:

- ☐ Both agents to have the authority to act separately.  
☐ To require both agents to act jointly unless one is incapacitated.  
☐ The second agent to be a successor, acting only if the first choice is incapacitated.

Please provide the name, address, phone number, and relationship of your second choice of agent: \_\_\_\_\_

\_\_\_\_\_

Do you wish to specify that you desire to donate your body organs for transplant upon death?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, are you also willing to donate organs and tissue for medical, educational, or scientific purposes?

\_\_\_\_\_ Yes \_\_\_\_\_ No

[Note: many State driver's licenses include space for you to indicate organ donation. Did you do so on your driver's license? \_\_\_\_\_ Yes \_\_\_\_\_ No]

If you are an organ donor, do you wish to expressly exclude certain organs or other detailed restrictions? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please state with detail your restrictions.

\_\_\_\_\_

Do you wish to specify that, if possible and if it does not place an undue burden upon your family that you prefer to die at home rather than in a hospital? \_\_\_\_\_ Yes \_\_\_\_\_ No

The advance medical directive or living will is ordinarily drafted in accordance with the laws of the State where you currently live, because the laws of the State where you are hospitalized control the effectiveness of your living will. This may be the State other than your State of legal residence. Do you wish to have the living will governed by the laws of the State where you currently live? \_\_\_\_\_ Yes \_\_\_\_\_ No